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Facsimile Cover Sheet

To:	Examiner Pape	From:	Scott Charles Richardson
Fax:	(571) 273-2201	Date:	July 13, 2005
Phone:	(571) 272-2201	Pages:	2 (incl fax cover)
Your Ref.:	serial no. 10/645,683	Our Ref.:	P1955US00
Re:	Courtesy Copy of Change of Correspondence Address		

Examiner Pape,

Further to our telephone conversation this morning, please find attached a copy of the Change of Correspondence Addressed I filed a few minutes ago via facsimile. The 24,333 Customer Number specifies Gateway's address in North Sioux City, South Dakota.

You may want to bring this to the attention of the Docket Clerk (or Legal Instruments Examiner) processing the Office Action for you, to ensure the OA is sent to Gateway's correct address.

Thank you very much for calling me earlier and taking the time to address this matter.

Regards,



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PTO/SB/122 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE**CHANGE OF
CORRESPONDENCE ADDRESS**
*Application*Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/645,683
Filing Date	21 Aug 2003
First Named Inventor	Vernon D. ERICKSON
Art Unit	2835
Examiner Name	Zachary PAPE
Attorney Docket Number	P1955US00

Please change the Correspondence Address for the above-identified patent application to:

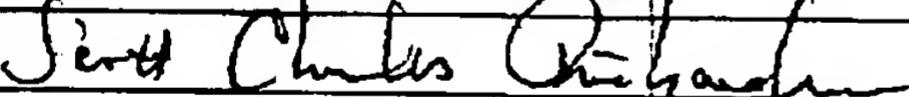
 Customer Number: **24,333****OR**

<input type="checkbox"/> Firm or Individual Name					
Address					
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This form cannot be used to change the data associated with a Customer Number. To change the Data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor
- Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record. Registration number 43,436
- Registered practitioner named in the application transmittal letter in an application without an Executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name **Scott Charles Richardson**Signature Date **July 13, 2005** Telephone **(703) 739-0573**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple Forms if more than one signature is required, see below.

 *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comment and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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